

110TH CONGRESS
1ST SESSION

H. R. 2609

To require the establishment of a task force to identify and disseminate evidence-based educational strategies and promising best practices to improve the quality of learning for individuals with autism in grades K–12.

IN THE HOUSE OF REPRESENTATIVES

JUNE 7, 2007

Mr. YARMUTH introduced the following bill; which was referred to the
Committee on Education and Labor

A BILL

To require the establishment of a task force to identify and disseminate evidence-based educational strategies and promising best practices to improve the quality of learning for individuals with autism in grades K–12.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Empowering Children
5 with Autism through Education Act of 2007”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

1 (1) Autism is widely recognized as an urgent
2 national healthcare crisis. According to the Centers
3 for Disease Control and Prevention, the prevalence
4 rate of autism is 0.75 percent, or one in every 150
5 children born today.

6 (2) Based on statistics from the Department of
7 Education and other governmental agencies, autism
8 is growing at the rate of ten to 17 percent per year.
9 At this rate, the estimates of the prevalence of au-
10 tism could reach 4,000,000 Americans in the next
11 decade.

12 (3) While no known cure for autism exists, the
13 general agreement is that early diagnosis followed by
14 appropriate intervention can improve outcomes for
15 later years for most children with autism.

16 (4) The National Council on Disability reported
17 that students with autism should be provided with
18 the opportunities and encouragement necessary to
19 achieve the same general outcomes that are viewed
20 as essential for all students. However, the special
21 characteristics of students with autism indicate cer-
22 tain outcomes that require increased emphasis. In
23 particular, educational programs for these individ-
24 uals should include as objectives the development of

1 social competence and independence in the perform-
2 ance of life skills.

3 (5) The limited access to successful evidence-
4 based services for children with autism is a major
5 impediment to the implementation of quality services
6 in public schools. Without these programs, successful
7 interventions are not provided as part of a child's
8 Individualized Education Program (IEP). As a re-
9 sult, individuals and families who wish to access
10 services are often only able to do so through incur-
11 ring significant non-reimbursable costs.

12 (6) The Individuals with Disabilities Education
13 Act (IDEA) guarantees a continuum of education
14 and service options in the least restrictive environ-
15 ment for students with disabilities. However, meet-
16 ing these requirements is challenging because many
17 regular educators do not have education or practical
18 experience with instruction of children with autism,
19 and even experienced special education teachers may
20 need additional preparation to work effectively with
21 students who have autism.

22 **SEC. 3. DEFINITIONS.**

23 In this Act:

24 (1) **AUTISM.**—The term “autism” means an au-
25 tism spectrum disorder or a related developmental

1 disability that is the result of a neurological disorder
2 affecting the normal functioning of the brain and
3 impacting development in the areas of social inter-
4 action and communication skills.

5 (2) COST-EFFECTIVENESS.—The term “cost-ef-
6 fectiveness” describes an alternative that effectively
7 balances costs and benefits delivering maximum ben-
8 efits for the investment costs.

9 (3) EVIDENCE-BASED.—The term “evidence-
10 based” means research that applies rigorous, sys-
11 tematic, and objective procedures to obtain valid
12 knowledge relevant to autism instruction, and in-
13 cludes research that employs experimental, quasi-ex-
14 perimental, and qualitative research methods involv-
15 ing rigorous data analyses that are adequate to test
16 the stated hypotheses and justify the general conclu-
17 sions drawn.

18 (4) INTERVENTION.—The term “intervention”
19 means the application of a structured, individualized
20 approach to skill-development for children with au-
21 tism.

22 (5) LEARNING MODELS.—The term “learning
23 models” means any complimentary learning tech-
24 niques designed to improve classroom learning for

1 students with autism, incorporating curricula,
2 courses, lessons, books, and workbooks.

3 (6) PROFESSIONAL DEVELOPMENT NEEDS.—

4 The term “professional development needs” means
5 job-embedded, ongoing professional development that
6 helps teachers, administrators, and school leaders
7 identify the potential indicators of autism, and im-
8 plement proven strategies to improve the quality of
9 learning for individuals with autism.

10 (7) PROMISING BEST PRACTICES.—The term

11 “promising best practices” means any technique,
12 method, process, activity, incentive, or reward with
13 demonstrated success in the learning environment.

14 (8) SERVICES.—The term “services” means any

15 complementary interventions or therapies done on an
16 individual basis or integrated into an educational
17 program, in an effort to help increase communica-
18 tion skills, develop social interaction, promote pro-so-
19 cial behavior, increase academic achievement, and
20 provide a sense of accomplishment.

21 (9) STATE.—The term “State” means any of

22 the 50 States, the District of Columbia, and Puerto
23 Rico.

24 (10) TASK FORCE.—The term “Task Force”

25 means the Empowering Children with Autism

1 through Education Task Force established by the
2 Secretary of Education under section 4(a).

3 **SEC. 4. ESTABLISHMENT OF TASK FORCE.**

4 (a) ESTABLISHMENT.—Not later than 90 days after
5 the date of the enactment of this Act, the Secretary of
6 Education shall establish a task force to be known as the
7 Empowering Children with Autism through Education
8 Task Force.

9 (b) PURPOSE.—The purpose of the Task Force is to
10 identify and disseminate evidence-based educational strat-
11 egies and promising best practices to improve the quality
12 of learning for individuals with autism in grades K–12,
13 including the following:

14 (1) Learning models, interventions, and services
15 that demonstrate improvements in reading, writing,
16 and math proficiency for individuals with autism.

17 (2) The cost-effectiveness of these learning
18 models, interventions, and services, and their appli-
19 cability for local education agencies.

20 (3) Professional development needs of educators
21 who serve individuals with autism.

22 (4) Methods for incorporating State-, local- and
23 community-based programs and services into the
24 classroom to provide comprehensive support for indi-
25 viduals with autism.

1 (5) Identification of barriers to successful im-
2 plementation of programs and services related to the
3 education of and provision of services to children
4 with autism and recommendations to address those
5 barriers.

6 (6) Dissemination of findings to Congress, all
7 relevant agencies, and States and United States ter-
8 ritories to improve the quality of learning for indi-
9 viduals with autism.

10 **SEC. 5. MEMBERSHIP OF TASK FORCE.**

11 (a) COMPOSITION.—The Task Force shall be com-
12 posed of not fewer than 20 members who meet quarterly,
13 of whom—

14 (1) four shall be appointed by the Secretary of
15 Education;

16 (2) four shall be appointed by the Secretary of
17 Education from among persons recommended by the
18 National Institutes of Health;

19 (3) four shall be appointed by the Secretary of
20 Education from among persons recommended by the
21 National Council on Disability;

22 (4) four shall be appointed by the Secretary of
23 Education from among persons recommended by or-
24 ganizations that advocate for individuals with autism
25 and their families; and

1 (5) four shall be appointed by the Secretary of
2 Education from among persons recommended by
3 State education agencies to represent school dis-
4 tricts.

5 (b) EXPERTISE.—The Secretary shall ensure that the
6 Task Force includes at minimum—

7 (1) special education professionals with exper-
8 tise in autism, general education teachers, and
9 teachers with experience developing and imple-
10 menting classroom learning models for students with
11 autism;

12 (2) healthcare providers with expertise in treat-
13 ing children with autism, including at least one
14 speech language pathologist;

15 (3) individuals with autism, families affected by
16 autism, and members of organizations that advocate
17 for individuals with autism and their families, whose
18 representation on the Task Force shall not be less
19 than one-fourth of all members; and

20 (4) health or education economists or other in-
21 dividuals with expertise in cost-benefit analysis and
22 health or education policy.

23 **SEC. 6. REPORTING REQUIREMENTS.**

24 (a) SUBMISSION.—

1 (1) IN GENERAL.—Not later than 27 months
2 after the date of the enactment of this Act, the Task
3 Force shall submit to Congress, the Secretary of
4 Education, and the National Institutes of Health a
5 report detailing its findings under section 4(b).

6 (2) GUIDANCE TO STATES.—Not later than 27
7 months after the date of the enactment of this Act,
8 the Secretary of Education, in conjunction with the
9 heads of relevant agencies, shall disseminate to the
10 relevant departments of each State and of United
11 States Virgin Islands, Guam, American Samoa, and
12 the Commonwealth of the Northern Mariana Islands
13 the report of the Task Force under paragraph (1)
14 with the purpose of providing practical guidance to
15 improve the quality of learning for individuals with
16 autism in grades K–12.

17 (b) CONTENTS OF REPORT.—The report submitted
18 by the Task Force under subsection (a)(1) shall include—

19 (1) measures taken to identify evidence-based
20 learning models, interventions and services, and
21 promising best practices, for improving the quality
22 of learning for individuals with autism in grades K–
23 12, including steps taken to ensure the participation
24 of individuals with autism, their families, and their
25 advocates;

1 (2) recommendations of learning models, inter-
2 ventions, services, and promising best practices most
3 applicable, cost-effective, and likely to raise pro-
4 ficiency in reading, writing, and math for individuals
5 with autism in grades K–12;

6 (3) assessment of existing professional develop-
7 ment programs for educators who work with stu-
8 dents with autism, and recommendations for expand-
9 ing professional development programs to meet the
10 growing need for qualified educators specializing in
11 classroom instruction for individuals with autism in
12 grades K–12, including—

13 (A) institutional limitations;

14 (B) considerations of existing continuing
15 education or professional development require-
16 ments;

17 (C) considerations of costs to educators as-
18 sociated with professional development; and

19 (D) quantitative analysis of resources
20 needed for the establishment of State autism
21 plans, provisions for professional development,
22 and the integration of community services; and

23 (4) overview of the States’ and local school dis-
24 tricts’ capacity to overcome barriers to successful de-
25 velopment, enhancement and implementation of pro-

1 grams and services for improving the quality of edu-
2 cation for individuals with autism in grades K–12,
3 including—

4 (A) school-, district-, and State-wide insti-
5 tutional limitations;

6 (B) categorical comparisons between re-
7 gions, urban and rural areas, socio-economic
8 groups, and ethnic groups; and

9 (C) quantitative analysis of resources need-
10 ed for the establishment of district-wide autism
11 plans, the purchase of new learning materials,
12 increased performance on State assessments,
13 improved graduation rates, and the implementa-
14 tion of learning models, interventions, services,
15 and promising best practices most likely to
16 raise proficiency in reading, writing, and math
17 for individuals with autism in grades K–12.

○